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PETITIONS OFFICE

PTO/SB/17 (2/96)



Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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FEE TRANSMITTAL

Patent fees are subject to annual revision on October 1.

These are the fees effective October 1, 1997.

Small Entity payments must be supported by a small entity statement.
otherwise large entity fees must be paid. See Forms PTO/SB/09-12.
See 37 C.F.R. §§ 1.27 and 1.28.

TOTAL AMOUNT OF PAYMENT (\$) 650.00

Complete If Known

Application Number	08/928,074
Filing Date	7/25/00
First Named Inventor	John O'Brien
Examiner Name	Hayes, R.
Group / Art Unit	1647
Attorney Docket No.	24001

METHOD OF PAYMENT (check one)

1. The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:
 Account #

FEE CALCULATION (continued)**3. ADDITIONAL FEES**

Large Entity Fee	Small Entity Fee
Code 181	Code 181

Fee Description

Fee Paid

Deposit
Account
Number
Deposit
Account
Name

Charge Any Additional
Fee Required Under
37 C.F.R. §§ 1.18 and 1.17

Charge the Issue Fee Set in
37 C.F.R. § 1.18 at the Mailing
of the Notice of Allowance

2. Payment Enclosed:

Check Money
 Order Other

FEE CALCULATION

1. BASIC FILING FEE

Large Entity Small Entity

Fee Code (\$)	Fee Code (\$)	Fee Description	Fee Paid
101	780	201 398 Utility filing fee	
106	330	206 165 Design filing fee	
107	540	207 270 Plant filing fee	
108	790	208 396 Reissue filing fee	
114	180	214 75 Provisional filing fee	

SUBTOTAL (1) (\$)

2. EXTRA CLAIM FEES

Total Claims	Extra Claims	Fee from below	Fee Paid
	20**	X	
Independent Claims	- 3**	X	
Multiple Dependent			

** or number previously paid, if greater; For Reissues, see below

Large Entity Small Entity

Fee Code (\$)	Fee Code (\$)	Fee Description	
103	22	203 11 Claims in excess of 20	
102	82	202 41 Independent claims in excess of 3	
104	270	204 135 Multiple dependent claim, if not paid	
109	82	209 41 ** Reissue independent claims over original patent	
110	22	210 11 ** Reissue claims in excess of 20 and over original patent	

SUBTOTAL (2) (\$)

106	130	205	65	Surcharge - filing fee or oath
127	60	227	25	Surcharge - late provisional filing fee or cover sheet
139	130	139	130	Non-English specification
147	2,520	147	2,520	For filing a request for reexamination
112	920*	112	920*	Requesting publication of SIR prior to Examiner action
113	1,840*	113	1,840*	Requesting publication of SIR after Examiner action
116	110	216	66	Extension for reply within first month
116	400	216	200	Extension for reply within second month
117	950	217	475	Extension for reply within third month
118	1,510	218	755	Extension for reply within fourth month
126	2,060	226	1,030	Extension for reply within fifth month
119	310	219	165	Notice of Appeal
120	310	220	155	Filing a brief in support of an appeal
121	270	221	135	Request for oral hearing
138	1,510	138	1,510	Petition to institute a public use proceeding
140	110	240	55	Petition to revive - unavoidable
141	1,320	241	660	Petition to revive - unintentional
142	1,320	242	680	Utility issue fee (or reissue)
143	450	243	225	Design issue fee
144	670	244	335	Plant issue fee
122	130	122	130	Petitions to the Commissioner
123	50	123	50	Petitions related to provisional applications
126	240	126	240	Submission of Information Disclosure Stmt
581	40	581	40	Recording each patent assignment per property (times number of properties)
146	790	246	395	Filing a submission after final rejection (37 CFR 1.129(b))
148	790	249	395	For each additional invention to be examined (37 CFR 1.129(b))

Other fee (specify) _____

Other fee (specify) _____

SUBTOTAL (3) (\$)

650.00

* Reduced by Basic Filing Fee Paid

SUBMITTED BY			Complete (if applicable)	
Typed or Printed Name	William C. Fuess			Reg. Number
Signature	William C. Fuess	Date	5/09/03	Deposit Account User ID

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

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Please type a plus sign (+) inside this box → +

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TRANSMITTAL
FORM

(to be used for all correspondence after initial filing)

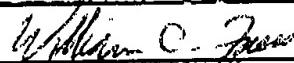
Total Number of Pages in This Submission

Application Number	08/928,074
Filing Date	09/11/97
First Named Inventor	John O'Brien
Group Art Unit	1647
Examiner Name	Hayes, R.
Attorney Docket Number	24001

ENCLOSURES (check all that apply)

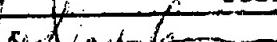
<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> After Allowance Communication to Group
<input checked="" type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment / Response	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition Routing Slip (PTO/SB/68) and Accompanying Petition	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> To Convert a Provisional Application	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input checked="" type="checkbox"/> Additional Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	<input type="checkbox"/> Petition to revive (unintentional)
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Small Entity Statement	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application		
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	FUESS & DAVIDENAS	
Signature		30,054
Date	5/08/03	

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Assistant Commissioner for Patents, Washington, D.C. 20231 on this date: **Fax (703)308-6911**

Typed or printed name	Joseph Davidenas
Signature	
	Date
	5/09/03

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